

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231, on the date shown below.

Dated: September 6, 2001

Signature: William Smith
(William Smith)

Docket No.: **RECEIVED** TESSERA 30-188 DIV
(PATENT)

SEP 14 2001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TECHNOLOGY CENTER 2800

In re Patent Application of:
Joseph Fjelstad

Application No.: 09/785,104

Group Art Unit: 2826

Filed: February 16, 2001

Examiner: K. Quinto

For: MICROELECTRONIC ELEMENTS WITH
DEFORMABLE LEADS

Commissioner for Patents
Washington, DC 20231

CERTIFICATION PURSUANT TO 37 C.F.R. § 1.97(E)(2)

Dear Sir:

Pursuant to 37 C.F.R. § 1.97(e) (2), undersigned counsel hereby certifies that no item of information contained in the accompanying Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application to the above-referenced patent application, or, to the knowledge of undersigned counsel, after making reasonable inquiry, no such item of information was known to any individual designated in 37 C.F.R. § 1.56(c) more than three months prior to the filing of the accompanying Information Disclosure Statement.

Dated: September 6, 2001

Respectfully submitted,

By William Smith

William Smith

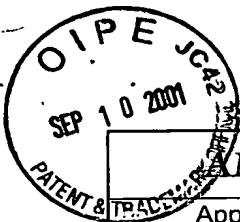
Registration No.: 46,459

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2826

AMENDMENT TRANSMITTAL LETTER		
Application No. 09/785,104	Filing Date February 16, 2001	Examiner K. Quinto
		Docket No. TESSERA 3.0-188 DIV Group Art Unit 2826 K. Quinto TECHNOLOGY CENTER 2800

Applicant(s): Joseph Fjelstad

Invention: MICROELECTRONIC ELEMENTS WITH DEFORMABLE LEADS

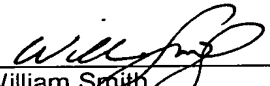
TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	10	- 20 =		x	0.00
Independent Claims	2	- 3 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

- ☒ Large Entity ☐ Small Entity
- ☒ No additional fee is required for this amendment.
- ☐ Please charge Deposit Account No. 12-1095 in the amount of \$ _____
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge and credit Deposit Account No. 12-1095
as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


William Smith
Attorney Reg. No.: 46,459

Dated: September 6, 2001

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